Mastercard Inc Form 4 March 02, 2017

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

Washington, D.C. 20549

January 31, Expires: 2005

SECURITIES

Estimated average burden hours per

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

response... 0.5

1(b).

Stock

(Print or Type Responses)

Name and Addr Fraccaro Micha	•	ng Person *	2. Issuer Name and Ticker or Trading Symbol Mastercard Inc [MA]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Check all applicable)			
2000 PURCHASE STREET			(Month/Day/Year) 02/28/2017	Director 10% Owner Officer (give title Other (specify below) Chief Human Resources Officer			
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
PURCHASE, NY 10577			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			

(City)	(State)	(Zip) Tab	ole I - Non-	Derivativ	e Secu	irities Acquir	ed, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired (A) Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Class A Common Stock	02/28/2017		F	896 (1)	D	\$ 110.425	4,791.148	D	
Class A Common	03/01/2017		S	763 <u>(2)</u>	D	\$ 112.3541	4,028.148	D	

(3)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of or Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 112.31	03/01/2017		A	16,488	<u>(4)</u>	03/01/2027	Class A Common Stock	16,488

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Fraccaro Michael

2000 PURCHASE STREET Chief Human Resources Officer

PURCHASE, NY 10577

Signatures

Craig Brown, as attorney-in-fact for Michael Fraccaro pursuant to a power of attorney dated July 11, 2016

03/02/2017

**Signature of Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Represents withholding of shares to pay tax liability incident to the vesting of restricted stock units pursuant to the terms of a stockholder-approved plan.
- (2) This transaction was effected pursuant to a pre-planned trading plan entered into by the reporting person on November 29, 2016 in accordance with Rule 10b5-1 of the Securities Exchange Act of 1934.
- (3) Represents the weighted average sales price for price increments ranging from \$112.295 to \$112.38.
- (4) The employee stock options vest in four (4) equal annual installments beginning March 1, 2018.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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